

Attorney's Docket No. SUN1P287/P4990

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHODS AND APPARATUS FOR OPTIMIZING GARBAGE COLLECTION the specification of which,

(check one)	1.	is attached hereto.				
	2.	was filed on		as		
	_	U.S. Application No.				
		and was amended on				
	_					
	3.	was filed on				
		International PCT Applicatio				
		and was amended on				
1 153	t I have reviewe	ed and understand the content	s of the above-identified s	specification, i	ncluding the	claims, as
amended by any a	mendment referi	red to above.				
. 19 . 19	المعالمة الم	e information which is materia	al to the examination of thi	is application i	n accordance	with Title
1 acknowledge the 37, CFR § 1.56.	e duty to disclose	a mormation which is materia	ii to the examination of thi	s application i	ii uccorumico	
37, CFK § 1.30.						
Prior Foreign Ap	pplication(s)					
Tilliaka, alaim for	usian neigritu ha	nefits under Title 35, United S	tates code 8 119(a)-(d) or	8 365(b) of ar	v foreign app	lication(s)
fair notant or inves	ntor's certificate	or § 365(a) of any PCT Inter	rnational application which	designated at	least one cou	ntry other
than the United	States listed he	low and have identified below	w, by checking the box,	any foreign a	pplication for	patent or
inventor's certific	cate, or PCT Int	ernational application having	a filing date before that of	of the application	on on which	priority is
claimed:					/ Benefits Clai	
				Priority		mad?
(A 1' (') N-)						med?
(Application No.)		(Country)	(Filing Date)		No	med?
(Application No.)		(Country)	(Filing Date)	Yes	_ No	med?
(Application No.)		(Country)		Yes		med?
(Application No.)		(Country)	(Filing Date) (Filing Date)	Yes	_ No	med?
	lication(s)			Yes	_ No	med?
(Application No.) Provisional Appl			(Filing Date)	Yes	_ No	med?
(Application No.) Provisional Appl		(Country)	(Filing Date)	Yes	_ No	med?
(Application No.) Provisional Appl	e benefit under 3	(Country)	(Filing Date)	Yes	_ No	med?
(Application No.) Provisional Appl I hereby claim the	e benefit under 3	(Country) 5 U.S.C. §119(e) of any Unite	(Filing Date)	Yes	_ No	med?

Atty. Dkt. No.: SUN1P287/P4990

(Revised 03/00)

Page 1 of 2





Prior U.S. Application(s)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

(Application No.)	(Filing Data)	(Status matem	ted, pending, abandoned)
(Application No.)	(Filing Date)	(Status - paten	ted, pending, abandoned)
(Application No.)	(Filing Date)	(Status - paten	ted, pending, abandoned)
Power of Attorney			,
And I hereby appoint the law firm of Number 022434 as my principal attor Office connected therewith.	Beyer Weaver & Thomas meys to prosecute this app	, LLP and all practiti lication and to transa	oners who are associated with the Customer ct all business in the Patent and Trademark
Direct Correspondence To:	Customer Num BEYER WEAVER & T P.O. Box 7' Berkeley, CA 947	HOMAS, LLP 78	22434 PATENT TRADEMARK OFFICE
ប៉ែ Direct Telephone Calls To:	Attorney Name at	telephone number (650) 961-8300
belief are believed to be true; and furl	ther that these statements we or imprisonment, or both, u	ere made with the kn inder section 1001 of	that all statements made on information and owledge that willful false statements and the Title 18 of the United States Code, and that ent issuing thereon.
Typewritten Full Name of Sole or First Inventor: David Wa Inventor's signature:	llman Deuf		e of Signature: 12/20/2000
Residence: (City) Sunnyvale		(Stat	te/Country) <u>California</u>

777 S. Mathilda Avenue, #266, Sunnyvale, California 94087

Atty. Dkt. No.: SUN1P287/P4990

Page 2 of 2

(Revised 03/00)

Post Office Address: